

Retail Food Establishment Inspection Report

Floyd County Health Department Telephone:812-948-4726 \times 6 62-

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24 Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishme Kroge		- -7	<u> </u>	Telephone Number 812-944-7016	Date of Inspection (mm/dd/yr) PERMIT #		
Establishment Address (number and street, city, state, zip code) 2064 Charlestown Rd New Albany, IN 47156						7/19	170
Owner			ness License	Purpose: 1. Routine	Follow-u	p Releas	
Owner's Ac		— 05	103 Nashville, TN 37230	2. Follow-up 3. Complaint	Summary of Violations:		
Person in C	harge		DEZ	4. Pre-Operational	c	NC_	Ø R.Ø.
Responsible				5. Temporary 6. HACCP	Menu Ty	pe (See back	of page)
Certified Fo	ood Manag	er C	5 (07/13/2022)	7. Other (list)	12	3	45
• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C" • VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"							
Section#	C/NC	R	Narrative Narrative			10 Be Co	rrected By
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PAUL REFSUIDER Werch Mgr. Inspected by (name and title printed): Tyler Smith (EHS)							
Received by	(signature			Inspected by (signature)			
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